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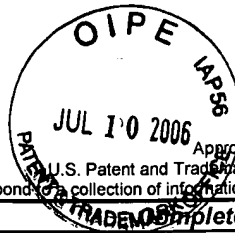
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/687,978
		Filing Date	October 20, 2003
		First Named Inventor	Yokitomo YUHARA
		Art Unit	3728
		Examiner Name	Steven B. Pollicoff
Total Number of Pages in This Submission	10	Attorney Docket Number	371312002200

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	Brian N. Fletcher		
Date	July 10, 2006	Reg. No.	51,683

DUPLICATE COPY FOR
FEE PROCESSING



PTO/SB/17 (01-06)

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FEE TRANSMITTAL For FY 2006		Complete if Known	
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/687,978
		Filing Date	October 20, 2003
		First Named Inventor	Yukitomo YUHARA
		Examiner Name	Steven B. Pollicoff
		Art Unit	3728
TOTAL AMOUNT OF PAYMENT		(\$)	120.00
		Attorney Docket No.	371312002200

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison & Foerster LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES			
Fee Description	Fee (\$)	<u>Small Entity</u> Fee (\$)	
Each claim over 20 (including Reissues)	50	25	
Each independent claim over 3 (including Reissues)	200	100	
Multiple dependent claims	360	180	
Total Claims	<u>5</u>	<u>Extra Claims</u>	<u>Fee Paid (\$)</u>
	- 20 = <u>0</u>	x <u>50.00</u>	= <u>0.00</u>
HP = highest number of total claims paid for, if greater than 20.			
Indep. Claims	<u>2</u>	<u>Extra Claims</u>	<u>Fee Paid (\$)</u>
	- 3 = <u>0</u>	x <u>200.00</u>	= <u>0.00</u>
HP = highest number of independent claims paid for, if greater than 3.			

3. APPLICATION SIZE FEE				
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).				
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
	- 100 = _____	/50 _____ (round up to a whole number) x _____	= _____	

4. OTHER FEE(S)		<u>Fees Paid (\$)</u>
Non-English Specification, \$130 fee (no small entity discount)		
Other (e.g., late filing surcharge): <u>1251 Extension for response within first month</u>		<u>120.00</u>

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	51,683
Name (Print/Type)	Brian N. Fletcher	Telephone	(703) 760-7796
		Date	July 10, 2006